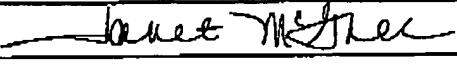


RECEIVED
CENTRAL FAX CENTER

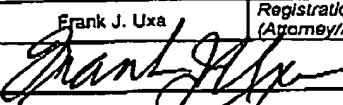
TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/624,915
		Filing Date	July 22, 2003
		First Named Inventor	Pflueger
		Group Art Unit	3743
		Examiner Name	Ragonese, Andrea
Total Number of Pages in This Submission	29	Attorney Docket Number	D-3077

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)	
			<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)
			<input checked="" type="checkbox"/> Fee Attached
			<input checked="" type="checkbox"/> Amendment/Reply
			<input type="checkbox"/> After Final
			<input type="checkbox"/> Affidavits/declaration(s)
			<input checked="" type="checkbox"/> Extension of Time Request
			<input type="checkbox"/> Express Abandonment Request
			<input checked="" type="checkbox"/> Information Disclosure Statement
			<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Frank J. Uxa Registration No. 25,612
Signature	
Date	April 28, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
<p>I hereby certify that this correspondence is being facsimile transmitted to the USPTO at fax number 703-872-8306, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.</p>			
Typed or printed name	JANET MCGHEE		
Signature		Date	4/28/05

The information contained in this facsimile message is privileged and confidential information intended for the use of the individual or entity named above. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and return the original message to us at the above address via the U.S. Postal Service.

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete If Known																																																										
		Application Number	10/624,915																																																									
		Filing Date	July 22, 2003																																																									
		First Named Inventor	Pflueger																																																									
		Examiner Name	Ragonese, Andrea M.																																																									
<input checked="" type="checkbox"/> Application claims small entity status. See 37 CFR 1.27		Art Unit	3743																																																									
TOTAL AMOUNT OF PAYMENT (\$)		240																																																										
METHOD OF PAYMENT (check all that apply)																																																												
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																																																												
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>21-0890</u> Deposit Account Name <u>Frank J. Uxa</u>																																																												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																																																												
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee																																																									
<input checked="" type="checkbox"/> Charge any additional fee(s) associated with this communication			<input checked="" type="checkbox"/> Credit any overpayments																																																									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2088.																																																												
FEE CALCULATION																																																												
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																																												
<table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> </tr> <tr> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td></td> <td colspan="2"></td> <td colspan="2"></td> <td style="text-align: right;"><u>Subtotal (1)</u></td> <td style="text-align: right;">0</td> </tr> </tbody> </table>						Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Utility	300	150	500	250	200	100	Design	200	100	100	50	130	65	Plant	200	100	300	150	160	80	Reissue	300	150	500	250	600	300	Provisional	200	100	0	0	0	0						<u>Subtotal (1)</u>	0
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES																																																							
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity																																																						
Utility	300	150	500	250	200	100																																																						
Design	200	100	100	50	130	65																																																						
Plant	200	100	300	150	160	80																																																						
Reissue	300	150	500	250	600	300																																																						
Provisional	200	100	0	0	0	0																																																						
					<u>Subtotal (1)</u>	0																																																						
2. EXCESS CLAIM FEES																																																												
<table border="1"> <thead> <tr> <th>Fee Description</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent</td> <td>50</td> </tr> <tr> <td>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent</td> <td>200</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td>360</td> </tr> <tr> <td>Total Claims</td> <td>Fee (\$)</td> </tr> </tbody> </table>						Fee Description	Small Entity	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	Multiple Dependent Claims	360	Total Claims	Fee (\$)																																													
Fee Description	Small Entity																																																											
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50																																																											
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200																																																											
Multiple Dependent Claims	360																																																											
Total Claims	Fee (\$)																																																											
<table border="1"> <thead> <tr> <th>-20 or HP =</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>HP = highest number of total claims paid for, if greater than 20</td> <td>x</td> <td></td> <td></td> <td>Fee (\$)</td> </tr> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Fee (\$)</td> </tr> <tr> <td>-3 or HP =</td> <td>x</td> <td></td> <td></td> <td>Fee (\$)</td> </tr> <tr> <td>HP = highest number of independent claims paid for, if greater than 3</td> <td></td> <td></td> <td></td> <td>Fee (\$)</td> </tr> <tr> <td></td> <td colspan="2"></td> <td colspan="2" style="text-align: right;"><u>Subtotal (2)</u></td> <td style="text-align: right;">0</td> </tr> </tbody> </table>						-20 or HP =	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	HP = highest number of total claims paid for, if greater than 20	x			Fee (\$)	Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	-3 or HP =	x			Fee (\$)	HP = highest number of independent claims paid for, if greater than 3				Fee (\$)				<u>Subtotal (2)</u>		0																								
-20 or HP =	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity																																																								
HP = highest number of total claims paid for, if greater than 20	x			Fee (\$)																																																								
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)																																																								
-3 or HP =	x			Fee (\$)																																																								
HP = highest number of independent claims paid for, if greater than 3				Fee (\$)																																																								
			<u>Subtotal (2)</u>		0																																																							
3. APPLICATION SIZE FEE																																																												
<table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Shorts</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>-100 =</td> <td>/50 =</td> <td>(round up to a whole number)</td> <td>x</td> <td style="text-align: right;"><u>Subtotal (3)</u></td> <td style="text-align: right;">0</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td colspan="2" style="text-align: right;">Fee Paid (\$)</td> </tr> </tbody> </table>						Total Sheets	Shorts	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	-100 =	/50 =	(round up to a whole number)	x	<u>Subtotal (3)</u>	0					Fee Paid (\$)																																							
Total Sheets	Shorts	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																																																								
-100 =	/50 =	(round up to a whole number)	x	<u>Subtotal (3)</u>	0																																																							
				Fee Paid (\$)																																																								
4. OTHER FEE(S)																																																												
<table border="1"> <tbody> <tr> <td><input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount)</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Filing a Brief in Support of Appeal: \$600 fee (\$300 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Other: _____</td> <td></td> </tr> <tr> <td></td> <td style="text-align: right;"><u>Subtotal (4)</u></td> <td style="text-align: right;">240</td> </tr> </tbody> </table>						<input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)		<input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)		<input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)		<input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount)		<input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount)		<input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount)		<input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount)		<input checked="" type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)		<input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)		<input type="checkbox"/> Filing a Brief in Support of Appeal: \$600 fee (\$300 small entity discount)		<input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount)		<input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount)		<input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)		<input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)		<input type="checkbox"/> Other: _____			<u>Subtotal (4)</u>	240																						
<input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)																																																												
<input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount)																																																												
<input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount)																																																												
<input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount)																																																												
<input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount)																																																												
<input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount)																																																												
<input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount)																																																												
<input checked="" type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount)																																																												
<input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)																																																												
<input type="checkbox"/> Filing a Brief in Support of Appeal: \$600 fee (\$300 small entity discount)																																																												
<input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount)																																																												
<input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount)																																																												
<input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)																																																												
<input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)																																																												
<input type="checkbox"/> Other: _____																																																												
	<u>Subtotal (4)</u>	240																																																										
SUBMITTED BY																																																												
Name (Print/Type)	Frank J. Uxa	Registration No. (Attorney/Agent)	25,612	Telephone	949-450-1750																																																							
Signature			Date	April 28, 2005																																																								